

AGENDA

2008 INTERAGENCY CONFERENCE OF MIGRANT SERVICE PROVIDERS

JUNE 27, 2008

**Hilton North
8181 North Shadeland Avenue
INDIANAPOLIS**

8:30 - 9:00

REGISTRATION

9:00 - 10:00

WELCOME AND OVERVIEW

***Darlene Slaby, Director
Indiana Department of Education***

***Keynote Address
TBD***

10:00 - 10:15

Transition Time

10:15 - Noon

Panel Discussion, Scenario A

NOON - 1:15

***LUNCH and
CARMEN VELASQUEZ MEMORIAL AWARD***

1:15 - 2:00

Panel Discussion, Scenario B

2:00 - 2:15

Dessert and Coffee Break

2:15 - 3:15

Panel Discussion (Scenario B) Continues

Wrap -Up

3:15 - 3:30

DOOR PRIZES

THIS IS A NON-SMOKING FACILITY!!!

You're Invited!

2008 INTERAGENCY CONFERENCE OF MIGRANT SERVICE PROVIDERS FRIDAY, JUNE 27, 2008

The annual Interagency Conference of Migrant Service Providers will offer an opportunity for Indiana's agencies and organizations to gather together to network and exchange program information in order to maximize service delivery. The conference will take place at the:

**Hilton North
8181 North Shadeland Avenue
Indianapolis**

Registration will begin at 8:30 a.m. and the last session will conclude at 3:30 p.m. The \$50.00 registration fee must be paid and received by June 13, 2008. Please make checks payable to: Indiana Health Centers, Inc. Send your check and completed registration form to:

**Jose Perez, Chief Operating Officer
Indiana Health Centers, Inc.
8003 Castleway Drive
Indianapolis, Indiana 46250**

Don't miss this valuable opportunity. If you have any questions please contact Darlene Slaby, Conference Coordinator, Indiana Department of Education at 800-382-9962 or 317-232-0555.

REGISTRATION

2008 INTERAGENCY CONFERENCE OF MIGRANT SERVICE PROVIDERS

FRIDAY, JUNE 27, 2008

**Hilton North
8181 Shadeland Avenue
INDIANAPOLIS, INDIANA 46250**

**The registration fee is \$50 per person. The paid registration is due by June 13, 2008.
Please copy this form as needed to register each participant. Return this form with your check
made payable to:**

**Indiana Health Centers, Inc.
8003 Castleway Drive
Indianapolis, Indiana 46250
Attention: Jose Perez**

REGISTRATION

2008 INTERAGENCY CONFERENCE OF MIGRANT SERVICE PROVIDERS

PLEASE PRINT

NAME

TITLE

AGENCY OR ORGANIZATION

ADDRESS

CITY, STATE & ZIP CODE

TELEPHONE NUMBER

__ (____) _____

**A catered lunch will be provided. If you wish to have a vegetarian lunch, you must make that
request with your paid registration.**

Vegetarian Lunch requested _____

**Agencies sending several people to the conference should provide a list of names of those
attending and a list of those wanting a vegetarian lunch.**